2003-0864.02

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DECLARATION FOR UTILITY OR

DESIGN

Attorney Docket Number

First Named Inventor

DESIGN	r iist Name	u inventor	Hrishikes	sh Pramod	Gogate	
PATENT APPLICATION		CO	MPLETE IF KN	OWN		
(37 CFR 1.63)		Application Number				
X Declaration Submitted OR Submitted after Initial Filing (surcharge	Filing Date		March 25,	. 2004	,	
	Art Unit					
Filing (37 CFR 1.16 (e)) required)	Examiner N	Examiner Name				
I hereby declare that:						
Each inventor's residence, mailing address, and citizenship ar	re as stated b	elow next to the	heir name.			
I believe the inventor(s) named below to be the original and fi which a patent is sought on the invention entitled:	īrst inventor(s)	of the subjec	ct matter which	n is claimed a	nd for	
Fuser Nip Re	elease Mech	anism	-			
the specification of which	the Invention)					
X is attached hereto						
OR						
was filed on (MM/DD/YYYY)	as Uni	ted States Ap	plication Numb	ber or PCT In	ternational	
Application Number and was amen	nded on (MM/[DD/YYYY)		(if	applicable).	
hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as						
amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for						
continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Foreign Fil Number(s) Country (MM/DD/		Prior Not Cla		ertified Copy Yes	Attached?	
			7			
			j l	Ħ	Ħ l	

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto [Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed. St. 1.2 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/01 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION — Utility or Design Patent Application

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City				State			-		ZIP
Country		Telephone	· <u>-</u> · · · · · ·			Fax			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST IN	NVENTOR:		ДАр	etition	has be	en filed	for this	s unsign	ed inventor
Given Name (first and middle [if any]) Hrishikesh Pramod				Family Name or Surname Gogate					
Inventor's Signature	W-		·						Date 3/25/04
Residence: City	State			Cour	try	_		Citizen	ship
Lexington	KY			In		ndia			
Mailing Address	Majestic View	v Walk							
City	State				ZIP				Country
Lexington		KY				405	09_		U.S. A.
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor									
Given Name Family Name									
(first and middle [if any]) Hara					or	Surnam	e P	ortig	
Inventor's Signature	lty								Date 3/2 <i>5/0Y</i>
Residence: City	State			Coun	try			Citizen	
Versailles	KY					U.S.			
Mailing Address 400 Tincher Drive									
City	State				ZIP			Countr	у
Versailles		KY			4	10383			U.S.A.
Additional inventors or a legal representative are being named on thesupplemental sheet(s) PTO/SB/02A or 02LR attached hereto.									

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number		
Filing Date	March 25, 2004	
First Named Inventor	Hrishikesh Pramod Gogate	
Title	Fuser Nip Release Mechanism	
Art Unit		
Examiner Name		
Attorney Docket Number	2003-0864.02	

I hereby appoint:				
X Practitioners associated with the Customer Number:	21972			
OR				
Practitioner(s) named below:				
Name	Registration Number			
				
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	dentified above, and to transact all business in the United States Patent and			
Please recognize or change the correspondence address for	ne above-identified application to:			
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Address	0.1			
City Country	State Zip			
Telephone	Fax			
I am the:				
X Applicant/Inventor.				
Assignee of record of the entire interest. See 37 CFR Statement under 37 CFR 3.73(b) is enclosed. (Form	3.71. PTO/SB /96).			
SIGNATURE of	Applicant or Assignee of Record			
Name Harald Portig				
Signature // Ref. Date March 25 2004	Tolorboro 1 (050) 222 0 (12)			
Wiatell 23, 2004	Telephone (859) 232-2456			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
X *Total of2 forms are submitted.				

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Application Number	
Filing Date	March 25, 2004
First Named Inventor	Hrishikesh Pramod Gogate
Title	Fuser Nip Release Mechanism
Art Unit	
Examiner Name	
Attorney Docket Number	2003-0864.02

I hereby appoint:		
X Practitioners associated with the Customer Number:	21972	
OR		
Practitioner(s) named below:		
Name	Registration Number	
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	identified above, and to transact all business in the United States	Patent and
Please recognize or change the correspondence address for	the above identified application to:	
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Address		
City	State Zip	
Country Telephone	Fax	
I am the:] Tax	
X Applicant/Inventor.		
Assignee of record of the entire interest. See 37 CFF	2 3 71	
Statement under 37 CFR 3.73(b) is enclosed. (Form	PTO/SB/96).	
SIGNATURE of	Applicant or Assignee of Record	
Name Hrishikesh Pramod Gogate		
Signature Signature		
Date March 25, 2004	Telephone	
NOTE: Signatures of all the inventors or assignees of record of the ent forms if more than one signature is required, see below*.	tire interest or their representative(s) are required. Submit multiple	
X *Total of 2 forms are submitted.		

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